Supplemental Application Data Sheet

App	lication	Informa	tion
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Application number:: 10/557,283

Filing Date:: 11/19/05 11/30/06

Application Type:: Regular

Subject Matter:: Utility

Suggested Group Art Unit:: 4644 1646

CD-ROM or CD-R?:: None

Sequence submission?:: None

Computer Readable Form (CRF)?:: No

Title:: APOLIPOPROTEIN-C-1-INDUCED

APOPTOSIS METHODS OF DIAGNOSING
ATHEROSCLEROSIS BY MEASURING

APOCI

Attorney Docket Number:: 61383(71699)

Request for Early Publication?:: No
Request for Non-Publication?:: No

Small Entity?:: Yes

Petition included?:: No

Secrecy Order in Parent Appl.?:: No

Applicant Information

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

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Given Name:: Subroto

Family Name:: Chatterjee

City of Residence:: Columbia

State or Province of Residence:: MD
Country of Residence:: US

Street of mailing address:: 6098 Sebring Drive

City of mailing address:: Columbia

State or Province of mailing address:: MD

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Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Peter

Middle Name:: O.

Family Name:: Kwiterovich
City of Residence:: Baltimore

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Street of mailing address:: 408 Woodlawn Road

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State or Province of mailing address:: MD

Postal or Zip Code of mailing address:: 21210

Correspondence Information

Correspondence Customer Number:: 49383

Representative Information

Representative Customer Number:: 49383

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Continuation of National Stage of	US04/16419	05/24/04
US04/16419	An application claiming the benefit under 35 USC 119(e)	60/473,224	05/23/03
US04/16419	An application claiming the benefit under 35 USC 119(e)	60/539,769	01/28/04

Foreign Priority Information

Assignee Information

Assignee name:: The Johns Hopkins University

Street of mailing address:: 3400 N. Charles Street

City of mailing address:: Baltimore

State or Province of mailing address:: MD

Postal or Zip Code of mailing address:: 21218

Signature:

A signature of the applicant or representative is required in accordance with 37 CFR 1.33 and 10.18. Please see 37 CFR 1.4(d) for the form of the signature.					
Signature	/Kellie K. DiNapoli, Ph.D., Esq./	Date	April 12, 2011		
Name (Print/Type)	Kellie K. DiNapoli, Ph.D., Esq.	Registration No. (Attorney/Agent)	61,455		